

FEC
FORM 1STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

E-MAIL CENTER

DEFENDING AMERICAN VALUES EVERYWHERE PAC (DAVE PAC)

ADDRESS (number and street)

1390 CHAIN BRIDGE ROAD

☐(Check if address
is changed)

#515

MCLEAN

CITY ▲

VA

STATE ▲

22101

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐(Check if address
is changed)

compliance@complianceconsultingva.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

N/A

2. DATE

12 / 12 / 2014

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CABELL HOBBS

Signature of Treasurer

CABELL HOBBS









Date

12 / 12 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 06/2012)

11001-11004

Candidate Committee:

1.  FEC ID number 
2.  FEC ID number 
3.  FEC ID number 
4.  FEC ID number 

Write or Type Committee Name

DEFENDING AMERICAN VALUES EVERYWHERE PAC (DAVE PAC)**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

DAVID P JOYCE

Mailing Address

9652 MUSIC STREET

NOVELTY

OH

44072

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☒ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name CABELL HOBBS

Mailing Address

1390 CHAIN BRIDGE ROAD

#515

MCLEAN

VA

22101

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer CABELL HOBBS

Mailing Address

1390 CHAIN BRIDGE ROAD

#515

MCLEAN

VA

22101

Title or Position
TREASURER

CITY

STATE

ZIP CODE

Telephone number

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BB&T

Mailing Address

1717 KING STREET

ALEXANDRIA

VA

22314

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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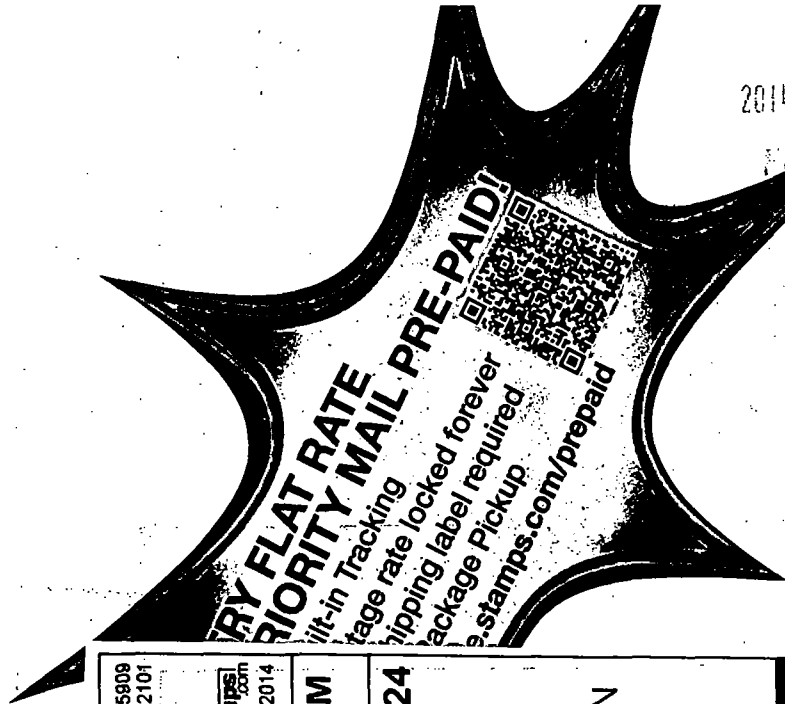
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Federal Election Commission
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2014-12-22 14:00:00